

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000049297

FILED
Apr 17, 2007
Secretary of State

Entity Name: KRYSTAL S. BEAUCHAMP, P.A.

Current Principal Place of Business:

665 WESTERN LAKE DR
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

5365 E COUNTY HWY. 30-A
107
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

665 WESTERN LAKE DR
SANTA ROSA BEACH, FL 32459

New Mailing Address:

5365 E COUNTY HWY. 30-A
107
SANTA ROSA BEACH, FL 32459

FEI Number: 59-3593848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANKLIN H. WATSON, P.A.
5365 E. HWY. 30-A, SUITE 105
SEAGROVE BCH, FL 32459 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: BEAUCHAMP, KRYSTAL S
Address: 665 WESTERN LAKE DR
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: BEAUCHAMP, KRYSTAL S
Address: 71 BRIDGETOWN AVENUE
City-St-Zip: ROSEMARY BEACH, FL 32461

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRYSA S BEAUCHAMP

MS

04/17/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date